BEST AVAILABLE COPY

Application or Docket Number											per		
	PATENT APPLICATION FEE DETERMINATION RECORD												
Effective December 29, 1999								0915-47476					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY						
FO	OR		(Column 1) (Column 2) NUMBER FILED NUMBER EXTRA			RAT		FEE	OR 	RATE	FEE		
_	SIC FEE									THE STATE OF THE S	690.00	i	
			minus 20= *						OR	VC-15	, 200.00	İ	
10	TAL ÇLAIMS		- l			X\$	9 -		OR	X\$18=		ļ	
	EPENDENT CL		minus 3 = *				}=		OR	X78=	,		
MU	ILTIPLE DEPEN	+13	0=		OR	+260=							
* If the difference in column 1 is less than zero, enter "0" in column 2							AL	20511	OR	TOTAL			
CLAIMS AS AMENDED - PART II							-		<u>.</u>	OTHER	THAN		
(Column 1) (Column 2) (Column 3)							\LL	ENTITY	OR	SMALL E			
MENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total=	- 3	Minus	•• //	=/	X\$	9=	•	OR	X\$18=	• • •	ľ	
	Independent	• /.	Minus	··· 3 · /	<u>{</u> =	ХЗ) _		OR	X78=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+13				+260=		1	
							U= OTAL	ļ	OR	TOTAL	· · · · · ·	ŀ	
. '	and restriction						FEE	L	OR	ADDIT. FEE	<u></u>	l	
<u> </u>	14	(Column 1)	2515746	(Column 2) HIGHEST	(Column 3)	·	· ,	1 4001	1		ADDI-		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA*	ΓE	ADDI- TIONAL FEE		RATE	TIONAL FEE		
	Total	• •	Minus	••	= .	X\$	9=		OR	X\$18=			
	Independent		Minus	***	=	X3:)=		OR	X78=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1	+260=			
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						ADDIT.	FEE	L	OR	ADDIT. FEE		ł	
(Column 1) (Column 2) (Column 3)									-				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NOW N	Total		Minus	••	=	X\$	9=		OR	X\$18=			
ME	Independent	• *	Minus	***	=	X39)=		OR	X78=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						0=		OR	+260=		1	
of the entry in column 1 is less than the entry in column 2, write "0" in column 3.												1	
	lif the Williahact Alu	mbor Praviously P	aid For IN THI	S SPACE is less the	an 3. enter "3."					ADDIT. FEE	<u> </u>	1	
	The "Highest Nurr	nber Previously Pa	id For (Total o	r Independent) is the	e nignest numbe	ar round th t	ne et	shichiga ac	A HI CO	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1=	